

BOOK REVIEW

EDWARD WALLERSTEIN, EDITOR: *Circumcision: An American Health Fallacy*. New York, Springer, 1980, pp. 281

Books on circumcision fall essentially into three categories: those that plead for it, those that argue against it, and those that are neutral. The author has chosen to make his book the strongest possible invective against it. To do so he not only develops a great number of practical arguments condemning circumcision (to be discussed later), but also uses psychologic devices to enforce his strategy. Some of the latter include: including two forewords, each written by a physician of high reputation, both Columbia University professors who condemn routine male circumcision right from the start; the stressing of his Jewishness, arguing that this lends his antircircumcision stand greater credibility; and attributing the prevalence of male circumcision in this country to the profit motive of doctors and hospitals who are reimbursed for it from third party payers under the guise of "surgical procedure."

He appeals to the antiphysician sentiment fashionable nowadays by mentioning somehow that in the 19th century Negro slaves were used by doctors for experimental surgery. He claims that circumcision was one of the "brutal" means by which doctors tried to suppress masturbation. Their erstwhile strong antimasturbation stand, which included the use of "cruel" mechanical devices, is used as proof that physicians were wrong in the first place. Since they strongly recommended circumcision for a wrong purpose then, they must still be wrong when they advocate it now — for whatever reason they now profess. He claims that the medical establishment violates the "informed consent" principle when it permits, condones, recommends, or performs routine circumcision on infants. He appeals to the growing consumer's rights, patient's rights, and children's rights movements. He states that the incidence of routine male circumcision is much higher here than in any other country and titles one of his chapters Why Only in the United States? Thus he caters to the apprehension of all those who fear that this country is falling behind others.

He narrates the history of the Society of Orificial Surgery, which flourished here between 1890 and 1923, in such a manner as to suggest that its

only purpose was to spread the custom of male circumcision and female clitoridectomy throughout the United States. He neglects to mention that the physicians who were members of this society also performed nasal polypectomies, tonsilectomies, and hemorrhoidectomies and, as a matter of fact, their principal income derived from these three operations. His inference is that since physicians pursued circumcision with a missionary zeal even in the 20th century, they cannot be regarded as objective even nowadays.

Wallerstein's final and most powerful psychological device is the inclusion of a chapter entitled Female Circumcision. The last 50 pages of the book are devoted to this topic. The chapter begins innocently enough with true female circumcision (a minor procedure to free the clitoris by removing the clitoral foreskin for the purpose of providing greater satisfaction in women who have coital difficulties). It soon wanders, however, into a variety of ethnic mutilations of the female genitals such as clitoridotomy, clitoridectomy, removal of the labia and infibulation plus a combination of nearly all these procedures called the Pharaonic circumcision. In the third world live at least 68 million women who have undergone at least one of these mutilations (page 253).

Any Caucasian reader who lives in a Western-oriented country and has no anthropologic background will be offended by these customs and many may go so far as to consider them barbarous. Thus the book ends leaving the uninitiated reader with disgust and a dislike of *all* genital surgery. In short, the juxtaposition of American routine male circumcision to unpopular African customs provides the final message of the book.

Now to the author's practical arguments, which he makes by presenting data or by quoting sources. The medical world has discussed many issues connected with male circumcision, and the author seems to have taken a stand on nearly all of them. Just to mention a few: incidence, medical risks and morbidity of the operation, circumcision to prevent venereal disease, penile cancer, cancer of the cervix, premature ejaculation, possible psychologic effect of the circumcision trauma, the Jewish religion and circumcision.

In general, each issue is treated in such a manner as to prove that no benefit comes from male circumcision. To make his point, the author has marshalled a large amount of data, some convincing but others, in this reviewer's mind, of less weight. No one will argue, for instance, that

circumcision is the best way to protect one from contracting venereal disease (notwithstanding Frank Harris' memoirs, in which he extols the value of circumcision for this purpose). Modern antibiotics certainly are a better antidote.

I feel more strongly, however, about the prevention of cancer of the cervix by male circumcision than the author. Between 1942 and 1955, when nearly every cervical cancer ended up in the radiologist's office, I saw only two Jewish patients with this disease. Each had had intercourse with an uncircumcised partner several years earlier. (One had contracted gonorrhea in addition.) With the current increase in mixed marriages, one might expect a rise in incidence among Jews.

I also disagree with the author's contention that circumcision does not prevent cancer of the penis. This is probably true in the United States, where cleanliness is meticulously observed and frequent bathing or showering is the order of the day. Dr. Rustanje, director of a cancer clinic in Sri Lanka, told me that he sees more than 100 new cases of penile cancer a year. Most of the victims are mud farmers who wear a tight loin cloth that is rarely changed. When examined, the area in question is often encrusted with caked mud. There are three populations on the island, those who are not circumcised, those circumcised between the ages of 8 and 14 years, and those circumcised shortly after birth. Only the last category is free of penile cancer.

The most important issue is, of course, the danger of the procedure — the circumcision risk. The data presented in this book report from 0 to 225 fatalities per year. The author correctly pleads for more studies. If the procedure should prove dangerous, its benefits would certainly have to be extraordinary.

Aside from fatalities, there are bleedings, infections, improper bandaging, failure to recognize pre-existing congenital abnormalities, and unintentional mutilations. (I have seen two cases of such mutilation myself, caused by the use of a patented apparatus designed to make surgical circumcision easier. I have never seen a mutilation from a ritual circumcision or from conventional surgery of the kind used in most American hospitals. Most hospitals insist on the presence of a physician when the family prefers religious circumcision to observe the procedure and to see to it that the *mohel* complies with modern medical practice.)

The author could not mention a Johns Hopkins study in 1953 by Roebuck and Money wherein 98% of the babies born there were circumcised.

One complication observed was viral meningitis. Fatalities were one in 500,000, morbidity one in 500. Jewish data are more favorable because the Talmud prescribes the eighth day for the ritual. This is exactly the day on which the blood clotting faculty of the baby reaches the adult level. Nowadays, with utilization committees discharging mothers and babies before the eighth day in most hospitals, ritual circumcision is performed in the home, and morbidity data will not be forthcoming.

The bibliography of the book contains 909 entries. It is impossible to check whether they all have been quoted accurately. However, with the few with which I happen to be familiar, I find some disagreement. Page 36: The U.S. Patent Office issued not 20 but 33 patents for medical appliances designed to prevent masturbation up to 1932. Page 38: "The removal of the clitoris represents one of the ugliest aspects of American medicine, and only of American medicine." Not so. Marie Bonaparte described a German clinic in which it was performed in the mid-twenties (see later). Page 138: (Dr. R. D. Laing quoted) "The ritual mutilation was done within 24 hours of birth." It is *never* done that early. Page 170: A 1964 report cited 15 girls subjected to shortening of the clitoris at Columbia Presbyterian Medical Center. The author neglected to state why. Most of them had adrenal tumors. Though he did not criticize this paper, failure to mention that the operation was done out of medical necessity places an unfavorable light upon the whole venture. Page 172: The Viennese physician Gustav Braun reported on his first clitoridectomy in 1866. The purpose of the operation had nothing to do with masturbation as this author seems to believe. Braun tried to cure a woman of frigidity. Frigidity, as she and most doctors then perceived it, was the inability to achieve vaginal orgasm. Long before Freud, clitoral orgasm was considered infantile and undesirable. Dr. Braun claimed a total cure. Page 170: The author takes issue with the statement: "a clitoris is not necessary for normal sexual function"; Marie Bonaparte traveled to Egypt and interviewed clitoridectomized women. All were able to achieve orgasm. Moreover, she visited a clinic in Germany in which married German women submitted voluntarily to clitoridectomy. They wanted to be cured of masturbation which seemed to threaten their married life. Surprisingly, it was not successful. When they touched the spot where the clitoris had been they still felt excitement.

All in all, this is a useful book for the student of this subject. The statistical data and the bibliography will be welcome to many. The serious

scholar will have to read each quoted source in toto, however, for there are instances in which a given statement is quoted out of context or is misleadingly incomplete. To have drawn attention to the risk of routine male circumcision is the author's main contribution here.

The reader will most benefit from this book if he makes allowance for the emotional tenor of some of the author's statements. In short, the material presented is valuable but the message it is made to imply should be taken with a grain of salt.

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